

# TISSUE-SALTS

## SELECTION

## DOSES

## AND

## DIRECTIONS

(After Dr W H Schuessler)

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### **IMPORTANT**

**The health information contained herein is not meant as a substitute for advice from your physician, or other health professional. The following material is intended for general interest only; and it should not be used to diagnose, treat, or cure any condition whatever. If you are concerned about any health issue, symptom, or other indication, you should consult your regular physician, or other health professional. Consequently, the Author cannot accept responsibility for any individual who misuses the information contained in this material. Thus, the reader is solely responsible for all of the health information contained herein. However, every effort is made to ensure that the information in this material is accurate; but, the Author is not liable for any errors in content or presentation which may appear herein.**

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### **Selecting the Remedy**

THE KEY to success in using the Schuessler therapy is the accurate linking of the symptoms with the appropriate tissue-salt. Symptoms are significant pointers to the tissue-salts needed in any given case. Each of the tissue-salts has its own distinct symptoms "picture", i.e. the spasms, cramps and neuralgias of *Mag Phos*, acidity which points to *Nat Phos*, excess dryness or watery discharges which call for *Nat Mur*, and so on.

### **Directions**

Definitions: "Acute" means of sudden onset with more or less severity of symptoms. "Chronic" means of long continuance, lingering. A "chronic" ailment may have "acute" phases and for such phases the directions for acute conditions will apply.

### **Dose**

In general, an adult dose is four tablets, children two tablets. The tablets should be dissolved on the tongue, or in the case of very young children, may be given dissolved in a little warm water.

## Frequency of Dose

In chronic cases, three doses daily will suffice, but for acute conditions, a dose should be taken every half hour until relief is obtained; thereafter the frequency of dose should be gradually reduced to three times daily. When an initial improvement with the biochemic remedies is not maintained, treatment should be discontinued for a few days and the frequency of dose reduced when re-commencing treatment.

## Intercurrent Remedies

These are remedies, while of secondary importance, which have some bearing on a particular case. Such a remedy would be required where there is some underlying problem such as acidity (*Nat Phos*) anaemia (*Calc Phos*) nerve weakness (*Kali Phos*) and so on. Intercurrent remedies assist the action of the principle remedy or remedies by correcting any secondary condition which may have a retarding effect on general treatment.

## Alternate Remedies

When more than one remedy is required, it is usual for these to be taken in rotation daily, the frequency of dose depending on the acute or chronic nature of the ailment. On the other hand the predominating symptoms should be treated first; so try to balance the two to the best advantage.

*Note: Although when more than one tissue-salt is required it is usual for these to be taken in rotation, the convenience of a simultaneous dose has obvious advantages, and in many cases results come fully up to expectations. Whichever way they are used, the action of the tissue-salts is always entirely beneficial.*

## Changing the Remedy

In the treatment of some ailments, particularly those of an acute kind, differing symptoms may make their appearance during the course of treatment, and in such remedies should be changed or supplemented in accordance with the variation of the symptoms at each successive stage.

Take the common cold as an example. This usually begins with a feeling of stuffiness, congestion and sometimes feverish state. So in the early stages *Ferr Phos* and *Kali Mur* are required. This first stage is quite often followed by a watery discharge, a clear pointer to the need of the tissue-salt concerned with excessive moisture *Nat Mur*, which should be substituted for *Ferr Phos* and *Kali Mur*. Subsequently, the watery discharge could change to a thick mucous discharge calling for *Calc Sulph* or *Kali Sulph*, in place of *Nat Mur*. Finally when the cold has cleared up a short course of *Calc Phos* is recommended.

## External Application

For dry application a few tablets may be crushed and the powder applied direct to the affected part. This is the usual method of dealing with cuts and abrasions (*Ferr Phos*), after the injured part has been cleansed.

As a lotion, dissolve ten tablets in half a tumbler of water, which has previously been boiled and allowed to cool. This lotion should be dabbed on the affected part.

(*The Biochemic Handbook*, Dr W H Schuessler)

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